



# Greyhound Pets, Inc.

www.greyhoundpetsinc.org

P.O. Box 891

Woodinville, WA 98072

877-468-7681

## VOLUNTEER APPLICATION

Greyhound Pets, Inc. is an all-volunteer organization and needs any help you may be willing to give. Please fill out the questionnaire below and mail it to the above address. *(If you call us, please ask for Greyhound Pets, Inc.)* Thank you for wanting to volunteer!

Please include your spouse's name if he/she is willing to volunteer too.

Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_

Home Phone: (\_\_\_\_\_) \_\_\_\_\_ Best time to call: \_\_\_\_\_

Work Phone: (\_\_\_\_\_) \_\_\_\_\_ (or Retired)

Cell Phone: (\_\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

**Note: If accepted as a volunteer, you will be required to sign a Volunteer Agreement.**

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What days of the week are you available? (Check all that apply)

<input type="checkbox"/> Monday	Time: _____
<input type="checkbox"/> Tuesday	Time: _____
<input type="checkbox"/> Wednesday	Time: _____
<input type="checkbox"/> Thursday	Time: _____
<input type="checkbox"/> Friday	Time: _____
<input type="checkbox"/> Saturday	Time: _____
<input type="checkbox"/> Sunday	Time: _____

What are your areas of interests? (Check all that apply)

<input type="checkbox"/> Secretarial/Clerical	<input type="checkbox"/> Kennel Help (Bothell/Woodinville only)
<input type="checkbox"/> Transporting Dogs	<input type="checkbox"/> Pet Stores "Meet & Greets"
<input type="checkbox"/> Events organizer/assistant	<input type="checkbox"/> Fostering
<input type="checkbox"/> Other (specify) _____	

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### IF YOU ARE UNDER 18

Guardian's name: \_\_\_\_\_

Guardian's contact #: \_\_\_\_\_

Guardian's signature: \_\_\_\_\_